

FEC FORM 2
STATEMENT OF CANDIDACY

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2007 APR 24 AM 9:26

1. (a) Name of Candidate (in full) Cathy McMorris Rodgers		
(b) Address (number and street) PO Box 137		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Spokane WA 99210		2. Identification Number C00390476
4. Party Affiliation Republican	5. Office Sought US House of Reps	6. State & District of Candidate WA-05

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the _____ election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Cathy McMorris For Congress
(b) Address (number and street) PO Box 137
(c) City, State, and ZIP Code Spokane WA 99210

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)
(b) Address (number and street)
(c) City, State, and ZIP Code

DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)

9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by

9A	0.00	for the primary election, and
9B	0.00	for the general election.

If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Cathy McMorris Rodgers	Date 4-18-07
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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PREPARER
(3/2005)


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